



Commissioner of the Revenue

CULPEPER COUNTY

web.culpepercounty.gov

151 N. Main St, Suite 201

PO Box 1807

Culpeper, VA 22701

(540) 727-3443

Fax: (540) 727-3472

Business Name: _____

Address: _____

Federal ID # _____ VA Sales Tax # _____

1. Transient Occupancy Tax Remittance For Year Ending: _____

2. Gross Receipts Subject to Tax For Above Year: _____

3. 2% of Receipts for Item #2 Above: _____

4. **LESS** 1% Collection Fee of Item #3 Above: _____
(Note: Collection Fee Does Not Apply if Filed Late)

*****OR*****

5. **PLUS** 10% of Item # 3 if Filed Late: _____

6. Net Tax Remitted: _____
(After Adjustments For 1% Collection
Fee or 10% Penalty)

I hereby certify that the figures shown above are true and correct to the best of my knowledge.

Signature: _____ Date: _____

NOTE: Tax Remittances are due on or before the **31st of March** following the end of each calendar year.

Make checks payable to Culpeper County Treasurer

Mail to: Commissioner of the Revenue
PO Box 1807
Culpeper, VA 22701